

Serial No. 09/014087

**REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL
AND FEE AUTHORIZATION**

Applicant: Carlyle, et al.

Examiner: Paul Prebilio

Serial No.: 09/014087

Group Art Unit: 3738

Filed: January 27, 1998

Docket No.: 01610.0053-US-01

Title: PROSTHESIS WITH ASSOCIATED GROWTH FACTORS

CERTIFICATE UNDER 37 C.F.R. 1.10:

'Express Mail' mailing number: EV 314775605 US

Date of Deposit: January 16, 2004

The undersigned hereby certifies that this Transmittal Letter and the paper or fee, as described herein, are being deposited with the United States Postal Service 'Express Mail Post Office To Addressee' service under 37 CFR 1.10 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

By:

Cheryl L. Millman
Cheryl L. Millman

Mail Stop RCE
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

RECEIVED

JAN 23 2004

TECHNOLOGY CENTER R3700

1. This is a request for Continued Examination (RCE) under 37 C.F.R. §1.114 of the above-identified application.
2. The following are submitted under 37 C.F.R. §1.114.
 - a. ☒ Previously Submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be considered as a submission even if this box is not checked.
 - ☐ Amendment/Reply under 37 C.F.R. §1.116 previously filed on
 - ☒ Consider the arguments in the Appeal Brief previously filed on May 23, 2003
 - ☐ Consider the arguments in the Reply Brief previously filed on
 - ☐ Other
 - b. ☒ Enclosed
 - ☒ Request for Reconsideration Accompanying Request for Continued Examination Under 37 CFR § 1.114
 - ☐ Affidavit(s)/Declaration(s)
 - ☐ Information Disclosure Statement
 - ☐ Fee Calculation Sheet
 - ☐ Petition for Extension of Time
3. Miscellaneous
 - a. ☐ Suspension of action on the above-identified application is requested under 37 C.F.R. §1.103(c) for a period of _____ months.
 - b. ☐ Other:

4. Fees

a. ☒ Check(s) for required fees

1. ☒ Check in the amount of \$770.00 for RCE filing fee as required under 37 CFR 1.17(e).
2. ☐ Check in the amount of _____ for request for suspension of action
3. ☐ Check in the amount of _____ for an Extension of Time
4. ☐ Other: _____

b. ☐ The Commissioner is hereby authorized to charge the following fees, or credit any overpayments to Deposit Account number 50-1038. A duplicate copy of this form is enclosed.

1. ☐ The RCE fee of _____ required under 37 CFR 1.17(e).
2. ☐ The request for suspension of action
3. ☐ The Extension of Time for _____ months
4. ☐ Other: _____

c. ☐ Payment is made via credit card. (Form PTO-2038 is enclosed)

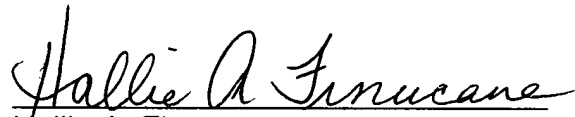
d. ☒ Authorization is hereby given to charge any fees that relate to the filing of this RCE and are necessary to avoid abandonment of this application, or credit any overpayments, to Deposit Account Number 50-1038. If an extension of time for replying is necessary, the undersigned hereby petitions therefor.

Respectfully submitted,

Altera Law Group, LLC
Customer No. 22865

Date: January 16, 2004

By:


Hallie A. Finucane
Reg. No. 33,172
HAF/mar